PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

36992.00066

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN OR SMALL ENTITY | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|------------------|-----------------------------------|------------------|--------------------------|-------|--------------------|------------------------|----------|----------------------------|------------------------|
| TOTAL CLAIMS | | | 19 | | | 3 | | RATE | FEE | 7 | RATE | FEE |
| FOR | | | NUMBER FILED | | NUME | BER EXTRA | | BASIC FEE | <u> </u> | OR | BASIC FEE | 710.00 |
| TOTAL CHARGEABLE CLAIMS | | | 19 minus 20= | | . 9 | | | X\$ 9= | | OR | X\$18= | |
| INDEPENDENT CLAIMS | | | ∠/ minus 3 = | | * // | | | X40= | | OR | X80= | 80.00 |
| ML | JLTIPLE DEPE | NDENT CLAIM F | RESENT | | | | | +135= | | 1 | +270= | 00.3~ |
| * If | the difference | in column 1 is | less than z | ero, enter | "0" in d | column 2 | L | TOTAL | | OR OR | TOTAL | 70 |
| CLAIMS AS AMENDED - | | | | | T II | | | TOTAL | | Jon | OTHER | 790 'σι Than |
| | The constraint and a second se | (Column 1) CLAIMS | | (Colum | | (Column 3) SM | | SMALL | NTITY | OR | SMALL | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | NUMI PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * -NTATION OF M | Minus | *** | CLAINA | = | | X40= | | OR | X80= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +135= | | OR | +270= | |
| | | | | | | | L | TOTAL DDIT. FEE | ···· · | | TOTAL ADDIT. FEE | |
| | and the second of the second o | (Column 1) | | (Colun | | (Column 3) | _ ^ | DDII. FEE | | • , | ADDIT. FEE | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUME PREVIO PAID I | BER DUSLY | PRESENT EXTRA | | RATE | addi- Tional Fee | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| AME | Independent | NITATION OF M | Minus | *** | 2 | = | | X40= | | OR | X80= | |
| | FIRST PRESE | NTATION OF M | JUIPLE DEI | PENDENT | CLAIM | | - | +135= | | | .270 | |
| | | | | | | | L | TOTAL | | OR | +270= TOTAL | |
| | | (Column 1) | | (Colum | n 2) | (Column 2) | Αſ | DDIT. FEE | - | OR , | ADDIT. FEE | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMB PREVIO PAID F | ST ER USLY | (Column 3) PRESENT EXTRA | Γ | | ADDI- TONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| AME | Independent | * | Minus | *** | | = | | X40= | | | X80= | |
| ! | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | OR | <u> </u> | |
| * If | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 60 and 100 life. | | | | | | | | | OR L | +270= | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE TOTAL ADDIT | | | | | | | | | | | | |
| ' | Liigiiest NuMi | Del Freviously Pal | a cor (lotal or | ıuaepender | nt) is the | nighest number | found | I in the appre | opriate box | in colu | mn 1. | |